## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 1 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC	C C00544767
Check if 24-hour report 48-hour report New report Amends report filed	d on 08 / 12 / 2015
Full Name of Payee ALLEGIANCE LIST MARKETING	Date of Public Distribution/Dissemination
	08 01 2015
Mailing Address 202 CHURCH ST. SE SUITE 100	Amount
City State Zip Code	8625.00
LEESBURG VA 20175	Transaction ID : SE24.11704  Date of Disbursement or Obligation
Purpose of Expenditure AUGUST/SEPTEMBER MONTHLY LIST RENTAL FEES  Category/ Type 004	08
Name of Federal Candidate Support Office	ce Sought: House District:
HILLARY CLINTON Oppose	President Senate State:
Odicital To Date	oursement For: Primary X General
Tel Election for Cinec Scagni	Other (specify) -
Full Name of Payee AMERICAN ACTION NEWS	Date of Public Distribution/Dissemination
Mailing Address	08 01 2015
Mailing Address 203 SOUTH UNION STREET SUITE 300	Amount
City State Zip Code	3431.00
ALEXANDRIA VA 22314	Transaction ID : SE24.11691 Date of Disbursement or Obligation
Purpose of Expenditure AUGUST/SEPTEMBER MONTHLY ONLINE ADVERTISING FEES  Category/ Type 003	08 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ce Sought: House District:
HILLARY CLINTON Oppose	President Senate State:
201	oursement For: Primary X General
Per Election for Office Sought 221699.01	Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures	12056.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
Dan Backer  [Electronically Filed] Date	11 05 2015
Signature	

### : 97 'A = G7 9 @ G B9 CI G'H9 LH F9 @ 5 H98 'HC '5 'F9 DC FHZ G7 < 98 I @ 'C F' + H9 A = N5 H+ C B

Form/Schedule: SE

Transaction ID : SE24.11704

This report amended to update previously reported estimates with now-available final disbursement amounts. Due to lower than expected activity, the August budget was extended through September.

Form/Schedule: Transaction ID:

# 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC	C C00544767
Check if 24-hour report X 48-hour report New report X Amends report filed o	on 08 12 2015
Full Name of Payee BIG EYE DIRECT	Date of Public Distribution/Dissemination  08 01 01 02015
Mailing Address 13860 REDSKIN DRIVE	08 01 2015 Amount
City State Zip Code	1503.67
HERNDON VA 20171	Transaction ID : SE24.11693 Date of Disbursement or Obligation
Purpose of Expenditure ALLEGIANCE DIRECT AUGUST/SEPTEMBER MONTHLY DIRECT MAIL SUBVENDOR FEE  Category/ Type 003	08 / 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office 9	Sought: House District:
	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburs 221699.01  Disburs 2016	sement For:
Full Name of Payee BIG EYE DIRECT	Date of Public Distribution/Dissemination
Mailing Address 13860 REDSKIN DRIVE	08 01 2015 Amount
City State Zip Code	5084.10
HERNDON VA 20171 T	ransaction ID : SE24.11694 Date of Disbursement or Obligation
Purpose of Expenditure ALLEGIANCE DIRECT AUGUST/SEPTEMBER MONTHLY DIRECT MAIL SUBVENDOR FEE  Category/ Type 003	08 / 01 / 2015
Name of Federal Candidate Support Office	Sought: House District:
	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disburs 2016 2016	sement For:  Primary
(a) SUBTOTAL of Itemized Independent Expenditures	6587.77
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Dan Backer [Electronically Filed] Date	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

#### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 4 OF 6 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC	C C00544767
Check if 24-hour report X 48-hour report New report X Amends report file	d on 08 / 12 / 2015
Full Name of Payee CAMPAIGN SOLUTIONS	Date of Public Distribution/Dissemination
Mailing Address 117 N. SAINT ASAPH ST	08 01 2015 Amount
City State Zip Code	6372.00
ALEXANDRIA VA 22314	Transaction ID : SE24.11687 Date of Disbursement or Obligation
Purpose of Expenditure AUGUST/SEPTEMBER MONTHLY LIST RENTAL FEES  Category/ Type 003	08 01 2015
Name of Federal Candidate Support Office	ce Sought: House District:
LIII LADV CLINTON	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Dist 2016	oursement For: Primary
Full Name of Payee CAMPAIGN SOLUTIONS  Mailing Address 117 N. SAINT ASAPH ST	Date of Public Distribution/Dissemination  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City State Zip Code	4574.26
ALEXANDRIA VA 22314	Transaction ID : SE24.11688  Date of Disbursement or Obligation
Purpose of Expenditure AUGUST/SEPTEMBER MONTHLY EXTERNAL DEPLOYMENT COSTS  Category/ Type 003	08 / 01 / 2015
Name of Federal Candidate Support Office	ce Sought: House District:
HILLARY CLINTON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Dist 201	bursement For: Primary X General 6 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	10946.26
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Dan Backer [Electronically Filed] Date	11 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

### 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 5 OF 6 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Stop Hillary PAC	C C00544767	
Check if 24-hour report X 48-hour report New report X Amends report filed	d on 08 12 2015	
Full Name of Payee CAMPAIGN SOLUTIONS	Date of Public Distribution/Dissemination	
Mailing Address 117 N. SAINT ASAPH ST	08 01 2015 Amount	
City State Zip Code	3446.96	
ALEXANDRIA VA 22314	Transaction ID : SE24.11689 Date of Disbursement or Obligation	
Purpose of Expenditure AUGUST/SEPTEMBER MONTHLY FACEBOOK ADVERTISING  Category/ Type  003	08 / 01 / 2015	
Name of Federal Candidate Support Office	ce Sought: House District:	
HILLARY CLINTON Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disb 2016	oursement For:	
Full Name of Payee CD, INC.	Date of Public Distribution/Dissemination	
Mailing Address P.O. BOX 1877	08	
City State Zip Code	11312.09	
ALEXANDRIA VA 22313	Transaction ID : SE24.11690  Date of Disbursement or Obligation	
Purpose of Expenditure AUGUST/SEPTEMBER MONTHLY LIST RENTAL FEES AND ONLINE ADVERTISING  Category/ Type  003	08 01 2015	
Name of Federal Candidate Support Office	ce Sought: House District:	
HILLARY CLINTON Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought  Disk 201	oursement For:	
(a) SUBTOTAL of Itemized Independent Expenditures	14759.05	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Dan Backer  [Electronically Filed]  Signature	11 05 2015	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Stop Hillary PAC	C C00544767
Check if 24-hour report 48-hour report New report Amends report filed	d on 08 / 12 / 2015
Full Name of Payee MDS COMMUNICATIONS CORP	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address 545 W. JUANITA AVENUE	Amount
City State Zip Code	9713.64
MESA AZ 85210	Transaction ID : SE24.11708
Purpose of Expenditure  ALCHEST SEPTEMBER MONTHLY CHITPOLING CALLING  Category/	Date of Disbursement or Obligation
AUGUST/SEPTEMBER MONTHLY OUTBOUND CALLING COSTS  Category, Type 003	08 01 2015
Name of Federal Candidate Support Office	e Sought: House District:
HILLARY CLINTON Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disb 221699.01	ursement For: Primary X General
Tel Election for Cinec Googni	U Other (specify) ▶
Full Name of Payee POLITICAL LIST BROKERS, LLC	Date of Public Distribution/Dissemination
Mailing Address 107.5 WEST ST	08 01 2015
Mailing Address 107 S. WEST ST	Amount
City State Zip Code	15000.00
ALEXANDRIA VA 22314	Transaction ID : SE24.11692 Date of Disbursement or Obligation
Purpose of Expenditure AUGUST/SEPTEMBER MONTHLY LIST RENTAL FEES  Category/ 003	08 01 2015
Туре	00 01 2010
LUILLA DV OLINTON	ee Sought: House District:
∑ Oppose ∑	President Senate State:
Calendar Year-To-Date Per Election for Office Sought  Disb 2016	
	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	24713.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	60062.72
\(\frac{\partial}{\partial}\)	69062.72
Under penalty of perjury I certify that the independent expenditures reported herein were not m	ade in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	•
party committee, any pondical party committee of its agent.	
Dan Backer [Electronically Filed] Date	11 05 2015
Signature	